

**CMS NET CHANGE REQUEST**

Fax completed form to CMS Change Management at 916-327-0997.

|  |                                 |                               |
|--|---------------------------------|-------------------------------|
| Submitted By   |                                 | Date Submitted                |
| County   | Phone Number<br>(      )      — | Fax Number<br>(      )      — |
| E-Mail Address   |                                 |                               |
| System application<br><input type="checkbox"/> CMS Net <input type="checkbox"/> GHPP <input type="checkbox"/> Both |                                 | Screen name<br>Number         |

**Detailed Description of Request**

|                        |             |
|------------------------|-------------|
| Requested by           | Approved by |
| Description of request |             |
|                        |             |
|                        |             |
| Reason for change      |             |
|                        |             |
|                        |             |
| Benefits of change     |             |
|                        |             |
|                        |             |

**CMS Office Use Only**

|   |  |
|---|--|
| <input type="checkbox"/> Request approved | <input type="checkbox"/> Request assigned to: _____                      |
| <input type="checkbox"/> Request declined | Reason request declined:   |
|   | <input type="checkbox"/> Constrained by resources (funds, staff, time)   |
|   | <input type="checkbox"/> Contrary to CCS policy                          |
|   | <input type="checkbox"/> Does not follow case management protocol        |
|   | <input type="checkbox"/> Duplicate request                               |
|   | <input type="checkbox"/> E-47 Related                                    |
|   | <input type="checkbox"/> Included with implementation of another request |
|   | <input type="checkbox"/> Need additional information/clarification       |
|   | <input type="checkbox"/> Requires further analysis                       |
|   | <input type="checkbox"/> Not technically feasible                        |
|   | <input type="checkbox"/> Other: _____                                    |
|   | _____  |
|   | _____  |